

President Begaye disputes Medicaid policy

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Policy imposes work requirements for insurance eligibility

WASHINGTON D.C. — President Russell Begaye took a hard stance against a Centers of Medicare and Medicaid Services policy that imposes work requirements on individuals as a condition of eligibility for health insurance Nov. 15.

The CMS in January unveiled a policy requiring work or community engagement from “non-elderly, non-pregnant adult Medicaid beneficiaries who are eligible for Medicaid on a basis other than disability.”

In a letter to tribal leaders, the CMS claimed that allowing policy waivers would violate federal civil rights laws that bar discrimination based on race or national origin.

In his statements to CMS officials attending the Tribal Technical Advisory Group Nov. 15, Begaye reiterated his opposition to the work requirements, which seek to categorize tribes as racial groups instead of sovereign nations.

“This ill-considered action undermines tribal sovereignty, disregards the Constitution, ignores Supreme Court decisions and violates the treaties between the federal government and Indian tribes,” Begaye said. “This policy represents a fundamental misunderstanding of federal Indian policy and a mischaracterization of Indian tribes as a racial group. On behalf of all tribes, the

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Navajo Nation asks that CMS provide Native people with access to health care as promised through our long-standing treaty rights and prior negotiations with the federal government.”

Begaye also called attention to a House Appropriations Committee report that accompanied a federal spending bill signed Sept. 26.

The Labor, Health and Human Services, and Education, and Related Agencies Appropriations Bill, provided stopgap funding for the departments of Defense, Labor, Health and Human Services, and Education, and a supplemental report includes language that addresses the Medicaid work requirements issue.

The report, written by Rep. Tom Cole, an Oklahoma Republican who is also a member of the Chickasaw Nation, states that federally recognized Indian tribes are sovereign nations residing within states—but for which the federal government has trust responsibilities.

“As a result of this responsibility, the federal government has consistently held Indian tribes as a unique group when applying federal law and policy,” the report states. “Congress has routinely codified this relationship, most notably in the provision of health care by establishing a health system for tribal populations exclusively.”

In addition to establishing the Indian Health Service, the federal government also has enacted exemptions to ensure that states would not have to pay additional costs. For example, the Social Security Act provides a 100-percent federal match for Medicaid services, the report states.

“No discretionary action taken by any Administration can impede the direct relationship between the Federal government and the provision of health care for Indian Tribes,” the report states.

The Navajo Nation on Nov. 2 submitted a Freedom Of Information Act request to CMS and the Department of Health and Human Services, seeking an explanation of the department’s determination that exempting American Indians from the work requirements would raise civil rights concerns. Federal agencies have 20 days to respond to such requests.

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Also during Thursday's Tribal Technical Advisory Group meeting, President Begaye outlined other Navajo priorities, including the Nation's request to pilot the Community Health Aide Program, an initiative that serves Natives in Alaska and is seeking to expand to tribes in the lower 48 states.

Begaye also continued pushing for a Navajo Managed Care Organization, which the Nation hopes to launch in New Mexico next year.

"We need to be treated like a state and have full control over Medicaid," he said. "If we manage health care on the Navajo Nation we can build hospitals and oncology centers. We can open a Navajo medical school and build our own health care system, just like states do. We can do it, but we need a level playing field. We need the same opportunities to go after the same funding available to states."

Finally, Begaye requested federal assistance in hiring and retaining professionals at Indian Health Service facilities on the Navajo Nation. He asked that IHS offer competitive wages, increase residency opportunities and prioritize the selection of a permanent director of the Navajo Area Office — a position held by interim directors since 2015.

"The lack of a permanent director creates undue hardship on the Navajo Nation," Begaye said. "We cannot set long-term policy, engage with the federal government or other tribes, or implement programs without stability and leadership at the IHS. My request is that the IHS prioritize this selection and secure a permanent director for Navajo."